Approved, SCAO JIS CODE: DFN

Approved, SOAO				JIS CODE. DI N
STATE OF MICHIGAN PROBATE COURT COUNTY OF	DEMAND FOR NOTICE		FILE NO.	
Estate of				
Decedent last resided at  Address			and died Date	
2. I demand mailed notice pursuant t				
3. My financial or property interest in	the estate is:			
4. Notice should be mailed to me and	d/or my attorney at:			
4. Notice should be mailed to me and	aror my attorney at.			
Name (type or print)		Attorney name (type o	r print)	Bar no.
Address	_	Address		
City, state, zip	Telephone no.	City, state, zip		Telephone no.
		Date		
		Signature		

Do not write below this line - For court use only